Web date: 02/27/2013



35030 SE Douglas Street, Suite 210 Snoqualmie, WA 98065-9266 **206-296-6600** TTY Relay: 711

www.kingcounty.gov

## UNINCORPORATED KING COUNTY General Business License Application

For alternate formats, call 206-296-6600.

Application for businesses in unincorporated King County only

oplication for:		Office Use Only			
end or bring application and fee to the Department of Permitting at the address above.) ke checks payable to King County Office of Finance.)		dress above.)	Fee \$		check ash
Check one: New Renewal		Date Paid			
Business name			Receipt #		
Phono			License #		
		Expiration			
Business address Street		Fingerprints Date Issued			
- Cir	20.1		Dute Issued		
City	State Z	IP			
Mailing address				_	
Street (PO Box)		City		State	ZIP
Applicant					
Home address		0::			710
Street Nature of business:		City	S	State	ZIP
Sole-ownership Partnership  Please provide name, place of birth,  1.  Name: First	•		s or officers:		
	(5)				
Date of Birth Pla	ace of Birth	litie, i.e. owne	itle, i.e. owner or, If corp., Pres., V.P., Sec., Treas		
Name: First	Middle		Last		
	ce of Birth	Title, i.e. owne	r or, If corp., Pres	s., V.P., Sec	c., Treas
3. Name: First	Middle		Last		
Date of Birth Plan 4.	ce of Birth	Title, i.e. owne	Title, i.e. owner or, If corp., Pres., V.P., Sec., Treas		
Name: First	Middle		Last		
Date of Birth Pla	ce of Birth	Title, i.e. owner or, If corp., Pres., V.P., Sec., Treas			
		Applicant's signature			
For Office Use Only Date entered:	Requested:	y Fire M	Marshal 🔲 🛚	Zoning	□Inspector